

# **EMPLOYMENT OPPORTUNITY**

## **Guaranteed Education Tuition (GET) Outreach Specialist**

### **Washington Higher Education Coordinating Board**

The Higher Education Coordinating Board (HECB) is a 10-member citizen board that makes recommendations to the Legislature and Governor on higher education policy and administers all of the state's student financial assistance programs. The Board assesses the higher education needs of Washington citizenry and recommends enrollment and other policies to meet those needs. The Board is charged by state law with representing the "broad public interest above the interests of individual colleges and universities." The HECB reviews the operating and capital budget requests of the state's public colleges and universities and recommends budget priorities to the Governor and Legislature. The Board also approves new degree programs offered by the public four-year institutions of higher education and administers other postsecondary programs that serve the public.

### **About the Guaranteed Education Tuition (GET) Program**

The Guaranteed Education Tuition (GET) program allows families to purchase tuition units now, for use at a later date. These funds are invested and the purchaser is guaranteed a return, which will cover tuition at some future date. The Committee on Advanced Tuition Payment, commonly referred to as the GET Committee, governs the program. The Committee is composed of the executive director of the Higher Education Coordinating Board, the State Treasurer, the director of the Office of Financial Management, and two citizen members.

### **General Position Description**

This position reports to the outreach manager. This position is responsible for conducting presentations and exhibiting for the GET program at schools, fairs, and conferences and reporting the results to the outreach manager in written format.

- Under the direction of the outreach manager, represents the GET program to the public including developing contacts, and conducting program presentations to schools, businesses, fairs, conferences, and other targeted groups.
- Explains applications procedures to potential customers, and answers technical questions on all aspects of the GET program. Problem solves customer issues. Follows up with customer issues and questions.
- Responsible for recording travel expenses and submitting them to supervisor monthly.

### **Required Skills, Knowledge and Abilities**

- High school diploma or GED; some college work preferred.
- Some experience in public speaking and/or providing service to customers regarding inquiries about procedures, rules, policies and general information.
- Excellent communication and organizational skills.
- Ability to work independently, use good judgment in evaluating and making decisions; communicate effectively and maintain a courteous attitude toward the public and employees.

### **Compensation**

Compensation will be as follows for approved activities:

- \$150.00 per day for all-day events.
- \$50.00 per presentation.

A daily per diem is allowed for out of area travel, including reimbursement at prevailing state rates for hotel and mileage.

The number of events and/or presentations that may be offered for compensation will depend on the program needs. There is no guarantee of a minimum or maximum number of events or presentations that may be scheduled. **This is an exempt position.**

### **Other Related Information**

- Travel is necessary to carry out responsibilities of the position.
- A valid Washington State driver's license is required.
- Upon hiring, training will be provided. A knowledge test will be administered after the training. The knowledge test must be passed satisfactorily, before any events will be scheduled.

### **How to Apply**

*To be considered for this position, you must possess the required qualifications listed above and submit a complete application package, which must include the following:*

1. **Letter of Application.** A letter of application which addresses how your background qualifies you to perform the responsibilities described in this announcement.
2. **Resume.** A current resume including work experience and education.
3. **References.** A list of names, current addresses, and current telephone numbers of three employment references.
4. **Authorization to Release Information form.**
5. **Affirmative Action form (optional).**

*Initial screening will be based solely on the information contained in your application. You should keep a copy of your application for your files.*

**Please direct any questions about the position to:**

Denise Fry  
Outreach Manager  
1-800-955-2318  
[denisef@hecb.wa.gov](mailto:denisef@hecb.wa.gov)

**Submit your completed application materials to:**

Kerri McConnell  
Human Resources Assistant  
Washington Higher Education Coordinating Board  
917 Lakeridge Way SW  
P.O. Box 43430  
Olympia, Washington 98504-3430

**Application Closing Date**

This position is open until filled. Applications may be mailed or delivered to the above address, or faxed to (360) 704-6257. They may also be submitted in electronic format to: [humanresources@hecb.wa.gov](mailto:humanresources@hecb.wa.gov), please type "GET Outreach Specialist" in the subject line. Please be aware that an authentic signature is still required on the information release form when submitting materials in electronic format.

*The Higher Education Coordinating Board is an equal opportunity/affirmative action employer and is strongly committed to enhancing the diversity of its workforce. We will provide assistance in the recruitment, application and selection process to applicants with disabilities who request such assistance. Please contact us at (360) 753-7802 as early as possible regarding any assistance you may require.*



## **AUTHORIZATION TO RELEASE INFORMATION**

As an applicant for a position with the Higher Education Coordinating Board, I am required to furnish information for use in determining my qualifications. In this connection, I hereby authorize the Higher Education Coordinating Board to make inquiries regarding my education, work experience and references, unless otherwise stated below. I hereby release all parties and persons associated with any such inquiries from liability in connection with information they give.

A photocopy of this release form will be valid as an original thereof, even though the said photograph does not contain an original writing of my signature.

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



## Affirmative Action Data Sheet

Please complete and return this form with your employment application package.

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Check the item that best describes how you heard about this position.

|  |  |   |
|--|--|---|
| <input type="checkbox"/> Friend or neighbor      | <input type="checkbox"/> HECB Job line/ Web site | <input type="checkbox"/> Newspaper or other publication*    |
| <input type="checkbox"/> Department of Personnel |  |   |
| <input type="checkbox"/> Other State Agency*     | <input type="checkbox"/> Other                   | <input type="checkbox"/> An organization electronic notice* |

\*Please specify web site, organization, newspaper, publication or "other" source here:

The Higher Education Coordinating Board is an equal opportunity employer. The Board's state-approved Affirmative Action Program seeks to ensure that employment opportunity information reaches all qualified potential candidates, including African Americans, American Indians/Alaskan Natives, Asians/Pacific Islanders, Caucasians, Hispanics, women, men, persons age 40 and over, persons with disabilities, disabled veterans, and Vietnam era veterans. To implement this program more successfully, the Board requests that you provide the following information. Submission of this statistical information is voluntary; failure to complete this portion of the form will not adversely affect your candidacy for employment.

*This information will be separated from your application and handled confidentially*

Please check any/all of the following that apply:

|   |   |   |
|---|---|---|
| <input type="checkbox"/> Male                     | <input type="checkbox"/> African American/Black | <input type="checkbox"/> Vietnam Era Veteran      |
| <input type="checkbox"/> Female                   | <input type="checkbox"/> Asian/Pacific Islander | (served 180 days or more between 2/28/61          |
| <input type="checkbox"/> Age 40 or older          | <input type="checkbox"/> Caucasian/White        | and 5/7/75 and does not have a                    |
| <input type="checkbox"/> Person with a disability | <input type="checkbox"/> Hispanic/Latino        | dishonorable discharge)                           |
|   | <input type="checkbox"/> Native                 | <input type="checkbox"/> Special Disabled Veteran |
|   | American/American                               | (30% or more disability)                          |
|   | Indian/Alaska Native                            |   |